DEPARTMENT OF HEALTH AND FAMILY SERVICES Division of Disability and Elder Services Printed 07/28/2006

Provider Inspection Summary

For the period 06/01/2003 to 05/31/2006 Community Based Residential Facility CLASS AA (AMBULATORY) STATE OF WISCONSIN
Bureau of Quality Assurance
P.O. Box 2969
Madison WI 53701-2969

Facility Information

Facility Name: LSS NEXUS HOUSE (410240)

Address: 2002 ALGOMA BLVD, OSHKOSH, WI 54901

License Status: REGULAR

Licensed/Certified/Registered 06/01/1991

Regional Office: NORTHEASTERN REGION (GREEN BAY), (920) 448-5240

Survey History						
Survey ID: 0095272	End Date: 07/18/2005	Type: OTHER	Purpose: VERIFICATION VISIT			
Results: NO STATEMENT OF DEFICIENCY ISSUED						
Survey ID: 0094276	End Date: 02/23/2005	Type: STANDARD	Purpose: SURVEY			
Results: STATEMENT OF DEFICIENCY ISSUED						
Statement of Deficiency: #10007122 Served 03/17/2005 Compliance						
	<u>Deficiencies Cited</u> 83.41(1)(g)2.a 83.51(3)(a)	Subject Area SEPARATE BED SMOKE SEPARATION		Verified 07/15/2005 07/15/2005	<u>Corrected</u> Yes Yes	

Disclaimer: This information is provided as a public service by the Wisconsin Department of Health and Family Services (DHFS). The Department neither endorses any facility nor guarantees that this information is accurate, up-to-date, or complete. This information, which should not be used as a sole source in selecting a facility, does not replace official information sources.

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Complaint History

Date Complaint Received: 06/15/2005 Date Investigation Completed: 07/18/2005

Subject Area(s) Result

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